## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>F</i> 5	66621	12/27
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim	÷	Restricted	0	Objected	d
10   10   10   10   10   10   10   10	Claim H A Date	Claim	Date	Claim	Date
10   10   10   10   10   10   10   10					
10   10   10   10   10   10   10   10		inal		inal	
102   103   104   105		51		L 0	+++++
S			<del></del>		<del></del>
4   1   1   1   1   1   1   1   1   1					
55				1 1. 1 1	
1	5 1 1 1				
1	A 1				
59					
10					
11					
12					
15				<del></del>	<del>                                     </del>
15			++++		<del></del>
15	<del>  [</del>		<del></del>	<del></del>	++++++
117					<del>                                     </del>
117	16 1 1 3 - 5				<del>                                      </del>
116					<del>                                     </del>
20		68			
71	(e)	69		119	
Text	20 3 3	70		120	
122	MACHINI	71		121	
23					
25	23				
76					
128	25				
128	126				
80					<del></del>
80	28				<del></del>
36					<del></del>
36			<del>                                     </del>		<del></del>
36	32				<del></del>
36	3				
36	34	84			
138	(35) J				
138	36 1				
89	37				
40				<del></del>	
41 91   42 143   43 93   44 93   45 95   46 96   47 97   48 98   49 99	1 <del></del>			<del></del>	
42 92   43 93   44 94   45 95   46 96   47 97   48 98   49 99					<del></del>
43 93   44 143   45 95   46 96   47 97   48 98   49 99		<del></del>		141	
44 94   45 95   46 96   47 97   48 98   49 99	142		++++		<del>╏╸╏╸╏╸╏╸╏╸╏</del>
45 95   46 145   47 96   48 97   48 98   49 146   49 99			<del>                                     </del>		<del>┼╏╸╏╶╏╶╏╸</del> ┞
46 96   47 97   48 98   49 99			<del>- - - - - - - - - - - - - - - - - - - </del>		<del>╞┈╏┈╏┈╏╸╏┈╏┈╏</del>
47			┼┽┼┼┼┼┼┤		<del>   -   - -   </del>
48			<del>                                     </del>		╁╌╁╌╁╼╂╼┼╌┼
49 99 149			<del>                                     </del>		<del>                                     </del>
			<del></del>	<del></del>	
<u> </u>	50	100		150	

EST AVAILABLE COPY

BEST AVAILABLE

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)